DOCUMENT RESUME

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TITLE Attention Deficit Disorder: A Look at Alcohol and Other Drug Abuse Prevention.

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ABSTRACT

This leaflet briefly describes the symptoms and incidence of attention deficit disorder (ADD) and then discusses problems with alcohol and other drug abuse in people diagnosed with attention deficit disorder. The guide points out that alcohol and other drug abuse prevention efforts should include information specific to the person's disability. It offers suggestions to bring about positive interactions with persons with ADD, notes four commonly held myths about ADD and facts dispelling the myths, and lists four organizational and nine printed resources for more information. (JDD)

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A Look at Alcohol and Other Drug Abuse Prevention and...

ATTENTION DEFICIT DISORDER

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Attention Deficit Disorder (ADD) is marked by developmentally inappropriate degrees of inattention, impulsiveness, and hyperactivity (DSM III, R). ADD generally has an onset prior to the age of four. However, it is typical that ADD is not diagnosed until the child begins school. An estimated 3% of all children experience ADD, and it occurs approximately six times more frequently in males than in females.

A common fallacy is that ADD is a learning disability. ADD is behavioral in nature and is characterized by impulsivity and an inability to remain focused on one topic. ADD frequently is accompanied by hyperactivity. In contrast, a learning disability is associated with how a person learns. School difficulties are common to both disabilities.

It is believed that ADD has a biological basis. This disability occurs more frequently in children from families with a history of developmental disorders, conduct disorders and alcohol and other drug abuse (DSM III, R).

The Implications of Alcohol and Other Drug Abuse

Problems with alcohol and other drug abuse seem to occur more frequently in people diagnosed with ADD (Hechtman, 1986). Many youth experiencing ADD continue to show signs of the disability into adolescence and adulthood. If ADD persists into later adolescence, conduct disorder and alcohol and other drug abuse may be a problem for up to one half of these individuals.

For many people, it is difficult to distinguish between the behaviors associated with ADD and those associated with alcohol and other drug abuse—especially since both are often manifested in socially unaccepted behaviors. For this reason, estrangement from family and significant adults is a possibility. These behavior issues also make alcohol and other drug abuse treatment efforts more difficult. Standard treatment modalities often do not take into consideration the special needs of people with ADD. Additionally, young people with ADD may be prescribed medications for behavior control, and this also may be a risk factor for some forms of subsequent alcohol and other drug abuse.

Alcohol and other drug abuse prevention efforts should include information specific to the person's disability. For example, the following points might be emphasized in discussions with a person who has ADD:

- Even small amounts of alcohol can be harmful in combination with prescription drugs.

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- The use of alcohol and other drugs can interfere with learning and developing effective social skills, which could increase feelings of isolation and disenfranchisement.

- There is a difference between taking medication and using alcohol and other drugs to deal with emotions and difficult situations. It is important to learn effective ways to deal with stress and other problems and not use alcohol and other drugs to do so.

Resources: *A Special Message: Project Oz, A Comprehensive Drug Education Curriculum for Learning Disabled and Behavior Disordered Populations.* A drug education and prevention program now available for grades one through twelve. The price list and ordering information can be obtained by contacting Project Oz, 201 E. Grove Street, 2nd floor, Bloomington, IL 61701. Phone: (309) 827-0377.

Obtain a list of publications available for ordering from Learning Disabilities Association of America-Literary Depository, 4156 Library Road, Pittsburgh, PA 15234. Examples of publications available on ADD:

Attention Deficit Disorder-ADD Syndrome
Parenting Attention Disordered Teens
Attention Deficit Disorder in Teenagers and Young Adults
Educational Strategies for Students with ADD.

Suggestions to Improve Access and Positive Interactions

Be patient when communicating with someone with ADD. Ask clarifying questions throughout the conversation to ensure that the person is grasping the information provided. Repetition will be necessary.

When communicating with a person with ADD, use innovative and unusual examples to catch the person's attention. Those with ADD tend to stay more focused when the information and modalities are presented in diverse ways.

Take frequent breaks. When the person seems to be drifting away from the lesson, take a break before refocusing on the topic at hand. People with ADD have the most difficulty in situations which require prolonged periods of attention.

People with ADD seem to stay focused better when in a structured setting, receiving frequent reinforcements. Important information may best be given in one to one situations.

REMEMBER

ASK AND LISTEN!

A person with a disability is the expert about his or her disability.

MYTHS & **FACTS**

MYTH: *Attention deficit disorder is the same as learning disability.*

FACT: These two disabilities can co-exist but each addresses distinctly different symptoms. ADD considers a person's inability to focus attention or control aspects of behavior. It frequently is accompanied by hyperactivity. Learning disability relates to specific developmental disorders associated with learning and learning modalities.

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MYTH: *All people with ADD have brain damage.*

FACT: Although some people with ADD do have signs of brain damage, the majority do not have measurable differences in brain function.

MYTH: *People with ADD have intellectual deficits.*

FACT: Although there are exceptions, most people with ADD have average to above average intelligence.

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MYTH: *People outgrow ADD by the time they reach adulthood.*

FACT: Approximately one-third of the people with ADD experience continuing problems into adulthood, sometimes including conditions that adversely affect conduct.

ETC.

This space has been provided for you. Make notes or write questions that you want to ask resource organizations or agencies.

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For More INFORMATION

Organization

Children with Attention Deficit Disorders
1859 North Pine Island Road, Suite 185
Plantation, FL 33322
(305) 587-3700

Government Agency

Office of Special Education Programs
Room 3086, Switzer Building
330 C Street, SW
Washington, DC 20036
(202) 732-1007
(202) 732-1170 TDD

Community Contacts

To locate additional resources, contact your state Governor's Committee of People with Disabilities

or obtain a State Resource Sheet from

National Information Center for Children and Youth with Disabilities
PO Box 1492, Washington, DC 20013
(703) 893-6061 • (800) 999-5599
(703) 893-8614 TDD

References

American Psychiatric Association (1988). *Diagnostic and Statistical Manual of Mental Disorders.* (3rd ed. Revised). Washington, DC: American Psychiatric Association.

Gittelman, R., Mannuzza, S., and Shenker, R. (1985). Hyperactive boys almost grown up. I. Psychiatric status. *Archives of General Psychiatry,* 42(10), 937-947.

Hechtman, L., and Weiss, G. (1986) Controlled prospective 15 year follow up of hyperactives as adults: non-medical drug and alcohol use and antisocial behavior. *The American Journal of Psychiatry,* Vol. 31, 557-567.

Loney, J. (1988). Substance abuse in adolescents: Diagnostic issues derived from studies of attention deficit disorder with hyperactivity. *NIDA Research Monograph* 77, 19-26.

This information was developed as a part of a set of materials on alcohol and other drug abuse prevention and disability. Other documents on specific topics are available upon request.
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